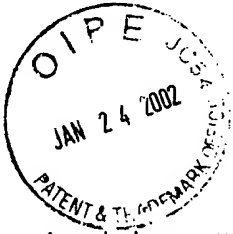


#3



Docket No. SH05-BQ29

**DECLARATION FOR PATENT APPLICATION
AND POWER OF ATTORNEY**

**COPY OF PAPERS
ORIGINALLY FILED**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention **BARCODE TICKET READER**, the specification of which

(check one) is attached hereto

☒ was filed on August 21, 2001
as Application Serial No.: 09/935,055

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

60/225,637	August 16, 2000	Provisional
(Application Serial No.)	(Filing Date)	(Status patented, pending, abandoned)
<hr/>		
(Application Serial No.)	(Filing Date)	(Status patented, pending, abandoned)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Joseph W. Price, Reg. No. 25,124; Albin H. Gess, Reg. No. 25,726; Michael J. Moffatt, Reg. No. 39,304; Gordon E. Gray III, Reg. No. 42,602 and Bradley D. Blanche, Reg. No. 38,387 with full power of substitution and revocation hereby given to Michael J. Moffatt, Esq.

Address all telephone calls to Michael J. Moffatt, Esq. at telephone no. (949) 261-8433
Address all correspondence to PRICE AND GESS
2100 S.E. Main Street
Suite 250
Irvine, California 92614-6238

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF INVENTOR Stephen P. Shoemaker, Jr.

SIGNATURE OF INVENTOR _____

DATE: 11/12/01

NAME OF INVENTOR _____

SIGNATURE OF INVENTOR _____

DATE: _____

NAME OF INVENTOR _____

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DATE: _____

NAME OF INVENTOR _____

SIGNATURE OF INVENTOR _____

DATE: _____

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) AND 1.27 (b)) - INDEPENDENT INVENTOR			Docket No. SHO5-BQ29
Serial No. 09/935,055	Filing Date August 21, 2001	Patent No.	Issue Date
Applicant/ Stephen P. Shoemaker, Jr. Patentee:			
Invention: BARCODE TICKET READER		COPY OF PAPERS ORIGINALLY FILED	
<p>As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled above and described in:</p> <p> <input type="checkbox"/> the specification to be filed herewith. <input checked="" type="checkbox"/> the application identified above. <input type="checkbox"/> the patent identified above. </p> <p>have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).</p> <p>Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:</p> <p> <input checked="" type="checkbox"/> No such person, concern or organization exists. <input type="checkbox"/> Each such person, concern or organization is listed below. </p> <p>*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities (37 CFR 1.27)</p> <div style="margin-top: 10px;"> <p>FULL NAME _____</p> <p>ADDRESS _____</p> <p style="text-align: center;"> <input type="checkbox"/> Individual <input type="checkbox"/> Small Business Concern <input type="checkbox"/> Nonprofit Organization </p> </div> <div style="margin-top: 10px;"> <p>FULL NAME _____</p> <p>ADDRESS _____</p> <p style="text-align: center;"> <input type="checkbox"/> Individual <input type="checkbox"/> Small Business Concern <input type="checkbox"/> Nonprofit Organization </p> </div> <div style="margin-top: 10px;"> <p>FULL NAME _____</p> <p>ADDRESS _____</p> <p style="text-align: center;"> <input type="checkbox"/> Individual <input type="checkbox"/> Small Business Concern <input type="checkbox"/> Nonprofit Organization </p> </div> <div style="margin-top: 10px;"> <p>FULL NAME _____</p> <p>ADDRESS _____</p> <p style="text-align: center;"> <input type="checkbox"/> Individual <input type="checkbox"/> Small Business Concern <input type="checkbox"/> Nonprofit Organization </p> </div>			